Submission Requirement 6

Offeror	Rank*
Centene UHC	1 3
University Family Car Mercy Care Group	e 2 4

^{*}If Offeror omits a submission, the requirement rank for that offeror for that submission will be an "X"

Evaluation Team Member	Signature	Date
Calishra Smith	Cslishi Jutel	2.3.17
DARA Johnson		2-3-17
Adam Rubson	- Polan Col	2-3-17

Facilitator		Signature	Date
Andrew	Colon	/NV-	2/8/17
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COMPONENT: PROG	RAM	
OFFEROR'S NAME:	Centene	

SUBMISSION REQUIREMENT No. 6 A young male Veteran with a service

Total Ranking

A young male Veteran with a service connected spinal cord injury and Post Traumatic Stress Disorder (PTSD) is currently residing in an Assisted Living Facility. He would like to someday own his own home, but will require in-home care/supports indefinitely. He would like to pursue other career opportunities and, although he is very motivated to return to work, he is concerned about losing his health care and other benefits. His interests include outdoor recreational activities that he pursued prior to his deployment and injury. Explain how the Offeror would support this member.

Rationale:

Major Observations:

Offeror described person-centered planning practices that focused on the member's needs as a veteran with PTSD and his life goals. Offeror addressed the member's frustration with having multiple case managers and acknowledged its role in helping the member to navigate across programs.

Offeror's case manager has appropriate training with respect to veterans' services.

Offeror described a comprehensive assessment process that covered all relevant domains and described its ability to tailor the assessment as necessary to be sensitive to the needs of the member, in light of his PTSD.

Offeror described clearly how it will assist the member in achieving his goals of transition to the community, employment and greater opportunities for recreation/socialization.

Offeror described ongoing care management activities that included coordinating with the VA, holding quarterly reviews with other member supports and modifying the person-centered care plan based on the member's changing needs and preferences.

Offeror described clearly a person-centered approach for supporting members with behavioral health needs that included crisis services, coordination with the VA, monitoring opioid use for potential dependency and informing the member of available peer supports.

Offeror described clearly the process for coordinating services and community resources related to service plan implementation, including: coordination with VA benefits, Freedom to Work, DB101 (providing hands-on assistance in using), recreational and peer support opportunities, resources for home ownership, educational opportunities and vocational rehabilitation. Offeror did not clearly address coordination with the ALF around supports for the member.

Offeror described clearly the transition planning process for future employment, including benefits counseling, building assets under a PASS plan and arranging supportive services (e.g., attendant care).

Offeror discussed components of the transition to home ownership, including home modification and equipment needs and supportive services (e.g., attendant care). Offeror did not outline the actual transition plan and did not describe clearly how it would assist the member with financial management/budgeting.

Offeror addressed educating the member about the potential for SDAC.

Evaluation Team Member	Signature	Date
Calishia Smith	Calish Sut	2.3.17
DARA Johnson		2-3-17
Adam Robson	Thusd	2-3-17

Facilitator	Signature	Date
Alune Com	MAC	2/3/17
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COMPONENT: PROG	RAM
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OFFEROR'S NAME:	University Family Care

SUBMISSION REQUIREMENT No. 6

Total Ranking

A young male Veteran with a service connected spinal cord injury and Post Traumatic Stress Disorder (PTSD) is currently residing in an Assisted Living Facility. He would like to someday own his own home, but will require in-home care/supports indefinitely. He would like to pursue other career opportunities and, although he is very motivated to return to work, he is concerned about losing his health care and other benefits. His interests include outdoor recreational activities that he pursued prior to his deployment and injury. Explain how the Offeror would support this member.

Rationale:

Major Observations:

Offeror described person-centered planning practices that identified all of the member's life goals and presented timelines for achievement of short- and long-term milestones.

Offeror's case manager has appropriate training with respect to veterans' services.

Offeror described a comprehensive assessment process that covered all relevant domains.

Offeror described clearly how it will assist the member in achieving his goals of transition to the community, employment and greater opportunities for recreation/socialization. Offeror discussed assisting the member to obtain independent living skills while still at the ALF, advising the member about educational funds available through the GI Bill, helping the member to begin volunteering as a bridge to employment and arranging paid caregiver status for a friend assisting the member with recreational activities.

Offeror described ongoing care management activities that included use of a regional case management team offering access to specialized case managers, as well as community specialists and behavioral health professionals.

Offeror described clearly a person-centered approach for supporting members with behavioral health needs that included assessing the member for SMI status, addressing the need for continuous coordination of behavioral health services and partnering with providers able to offer integrated physical/behavioral health services. Offeror addressed crisis services in a general manner by giving the member a number for crisis services as part of the crisis plan.

Offeror described portions of the process for coordinating services and community resources related to service plan implementation, including: coordination with VA benefits, DB101, recreational and peer

support opportunities, resources for home ownership, educational opportunities and coordination with the ALF around supports for the member. Offeror mentioned Freedom to Work but did not further address. Offeror discussed VA vocational rehabilitation but did not address traditional vocational rehabilitation.

Offeror noted the role of Freedom to Work and DB101 as part of the transition planning process for future employment, but did not describe clearly transition planning steps. Offeror discussed connecting the member with providers but did not describe clearly arrangement of supportive services (e.g., attendant care).

Offeror described clearly the process for transition to home ownership, addressing both short term (rental) and long term (ownership) housing options. Offeror described home modification and equipment needs (including use of Home Access program), benefits counseling and asset building. As noted above, offeror discussed connecting the member with providers but did not describe clearly arrangement of supportive services (e.g., attendant care).

Offeror noted SDAC as a consideration but did not describe clearly its process for educating the member as part of transition planning.

Evaluation Team Member	Signature	Date
Carlishia Smith	Calik St	2.3.17
DAIRA Johnson		2-3-17
Adam Robson	Bayd	2-3-17

Facilitator	Signature	Date
Andrew Cahen	IM _	- 2/7/17
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COMPONENT: PROC	BRAM
OFFEROR'S NAME:	UHC

SUBMISSION REQUIREMENT No. 6	Total Ranking
A young male Veteran with a service connected spinal cord injury and Post Traumatic Stress Disorder (PTSD) is currently residing in an Assisted Living Facility. He would like to someday own his own home, but will require in-home care/supports indefinitely. He would like to pursue other career opportunities and, although he is very motivated to return to work, he is concerned about losing his health care and other benefits. His interests include outdoor recreational activities that he pursued prior to his deployment and injury. Explain how the Offeror would support this member.	

Rationale:

Major Observations:

Offeror described person-centered planning practices in which the member guides the plan.

Offeror's case manager has appropriate training with respect to veterans' services.

Offeror described a comprehensive assessment process that covered all relevant domains and included use of motivational interviewing.

Offeror discussed the member's goals of transition to the community, employment and greater opportunities for recreation/socialization. Offeror discussed assessing the member's readiness for care planning but did not describe clearly the process for assessing independent living skills. Offeror mentioned using identified case management protocols but did not specify clearly what this meant.

Offeror described ongoing care management activities that included use of resource navigators.

Offeror described clearly a person-centered approach for supporting members with behavioral health needs that included arranging for any behavioral health services that the member needs, but is not currently receiving, and addressing the risk of SUD/suicide.

Offeror described portions of the process for coordinating services and community resources related to service plan implementation, including: recreational and peer support opportunities, resources for home ownership and coordination with the ALF around supports for the member. Offeror mentioned the role of navigators in helping members to access VA benefits, but did not describe in detail the benefits to be coordinated. Offeror mentioned Freedom to Work (although incorrectly named in response) and DB101 but did not describe in detail the process for coordinating with the member. Offeror mentioned educational opportunities available through community colleges but did not describe in detail the process for coordinating with the member. Offeror discussed DES Workforce

program but did not address traditional vocational rehabilitation.

Offeror noted the role of Freedom to Work and DB101 as part of the transition planning process for future employment, but did not describe clearly transition planning steps. Offeror described clearly options available for supportive services (e.g., attendant care).

Offeror described clearly the process for transition to home ownership, addressing both short term (rental) and long term (ownership) housing options. Offeror discussed assisting the member to adjust his room and board payment at the ALF as a means of building funds for transition to an apartment. Offeror described home modification and equipment needs. As noted above, offeror described clearly options available for supportive services (e.g., attendant care).

Offeror addressed educating the member about the potential for SDAC.

Evaluation Team Member	Signature	Date
Carlishia Smith	Color hit	2.3.17
SARA Johnson	752	2-3-17
Adam Robson	adays	2-3-17

Facilitator	Signature	Date
Andrew Coh	- //e	C 2/3/17
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COMPONENT: PROGRAM

Mercy Care Group

OFFEROR'S NAME:

SUBMISSION REQUIREMENT No. 6	Total Ranking
A young male Veteran with a service connected spinal cord injury and Post Traumatic Stress Disorder (PTSD) is currently residing in an Assisted Living Facility. He would like to someday own his own home, but will require in-home care/supports indefinitely. He would like to pursue other career opportunities and, although he is very motivated to return to work, he is concerned about losing his health care and other benefits. His interests include outdoor recreational activities that he pursued prior to his deployment and injury. Explain how the Offeror would support this member.	

Rationale:

Major Observations:

Offeror described person-centered planning process that identified all three of the member's major life goals.

Offeror's case manager has appropriate training with respect to veterans' services and "may" be a veteran.

Offeror described an assessment process that included detail on information sources (e.g., PCP and VA). Offeror did not present specifics on timelines.

Offeror discussed the member's goals of transition to the community, employment and greater opportunities for recreation/socialization. Offeror discussed assessing the member's readiness for care planning but did not describe clearly the process for assessing independent living skills, other than exploring the potential for obtaining a service dog.

Offeror described ongoing care management activities that included veteran specialist training.

Offeror described clearly a person-centered approach for supporting members with behavioral health needs that included developing a crisis plan and addressing PTSD treatment.

Offeror described portions of the process for coordinating services and community resources related to service plan implementation, including: coordination with VA benefits, Freedom to Work and DB101 (including hands-on assistance), recreational and peer support opportunities, resources for home ownership and vocational rehabilitation. Offeror did not describe in detail coordinating educational opportunities other than obtaining bus passes. Offeror did not describe in detail coordination with the ALF around supports for the member, other than sharing his crisis plan.

Offeror described the transition planning process for future employment, including arranging a DB101 session for the member and scheduling an appointment at the ILC for benefits counseling. Offeror did not describe clearly a process for asset building or following-up on ILC counseling. Offeror mentioned supportive services but did not describe clearly the member's supportive service needs or options.

Offeror described resource needs associated with transition to home ownership, but did not describe clearly the process. Offeror's reference to IDA and fair housing implied a transitional rental stage but this was not explicitly addressed. Offeror described home modification and equipment needs (including a visit to the Foundation for Senior Living Caregiver Training Home). As noted above, Offeror mentioned supportive services but did not describe clearly the member's supportive service needs or options, other than peer support during the transition.

Offeror addressed educating the member about the potential for SDAC.

Evaluation Team Member	Signature	Date
Carlishia Smith	Cold St	2.8.17
SAIZA Johnson	752	2-3-17
Adam Robson	Tidound	2-3-17

Facilitator	Signature	Date
Andrew Ch-		2/3/17
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